

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000074205 (0)

1. Corporation Name

SIGNATURE GOLF COMPANY



Principal Place of Business

22 SUNNINGDALE DR.
GROSSE POINTE MI 48236

Mailing Address

22 SUNNINGDALE DR.
GROSSE POINTE MI 48236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/26/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required
☐ \$5.00 May Be
Added to Fees

6. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30 ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name BRUCE ORR
82 Street Address (P.O. Box Number is Not Acceptable)
303 OCALA ROAD
83
84 City BELLAIR FL 85 Zip Code 33756

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

BRUCE A. ORR BRUCE A. ORR

(NOTE: Registered Agent signature required when reinstating)

DATE

4/16/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DP	WALLRICH, WAYNE T	22 SUNNINGDALE DR.	GROSSE POINTE MI 48236	☐
DST	CUBBA, PETER J	22 SUNNINGDALE DR.	GROSSE POINTE MI 48236	☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
1.1	1.2	1.3	1.4	☐	☐	☐
2.1	2.2	2.3	2.4	☐	☐	☐
3.1	3.2	3.3	3.4	☐	☐	☐
4.1	4.2	4.3	4.4	☐	☐	☐
5.1	5.2	5.3	5.4	☐	☐	☐
6.1	6.2	6.3	6.4	☐	☐	☐

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)